Form 990-PF
Department of the Treasury
Internal Revenue Service

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**Return of Private Foundation** 

or Section 4947(a)(1) Trust Treated as Private Foundation

► Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990PF for instructions and the latest information.

2018
Open to Public Inspection

For	alen	dar year 2018 or tax year beginning		, and ending		
Nar	ne of	foundation			A Employer identificatio	n number
_M	AR.	INA ORTH FOUNDATION	27-0115624	4		
Nun	ber ar	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_ <u>C</u>	/0	MAUREEN ORTH; 4907 ROC	KWOOD PKY NW		202-363-5	557
City	or to	own, state or province, country, and ZIP or foreign p			C If exemption application is	pending, check here
<u> W</u>	<u>ASI</u>	HINGTON, DC 20016				
G C	heck	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1 Foreign organization	is, check here
		Final return	Amended return		Foreign organizations m check here and attach or	eeting the 85% test.
		Address change	Name change	<del></del>	check here and attach o	omputation
H (	_	type of organization: X Section 501(c)(3) ex		()K	E If private foundation st	
<u> </u>			Other taxable private founda	X Accrual	under section 507(b)(1	
		rket value of all assets at end of year   J Accounti Part II, col. (c), line 16)	ng method: L Cash ther (specify)	Accrual	F If the foundation is in a	
(" 		1,399,164. (Part I, colum	nn (d) must be on cash basis	(3	under section 507(b)(1	(B), check here
	rt I				(a) Advicted not	(d) Disbursements
		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
_	1	Contributions, gifts, grants, etc., received	309,714.		N/A	
	l	Check If the foundation is not required to attach Sch. B				!
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	22,389.	22,389.		STATEMENT 1
	5a	Gross rents				, '
	b	Net rental income or (loss)				<u> </u>
ā	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	15,070.	···		<del></del>
Revenue	b	assets on line 8a		15,070.		•
Ş		Capital gain net income (from Part IV, line 2)	- / <u> </u>	*		
_	8	Net short-term capital gain			- /s <sup>5</sup> / - ·	
	9	Income modifications Gross sales less returns		·	Max	
		and allowances  Less Cost of goods sold		····	The same of the sa	
		Gross profit or (loss)				20
		Other income		<u> </u>	TO S	19 /2/
		Total Add lines 1 through 11	347,173.	37,459.	V	/9/
	13	Compensation of officers, directors, trustees, etc	0.	0.		<b>1</b> 0.
	14	Other employee salaries and wages				<u> </u>
"	15	Pension plans, employee benefits				
JSe.		Legal fees			<u> </u>	
Expenses		Accounting fees STMT 2	4,200.	2,100.		2,100.
		Other professional fees STMT 3	4,578.	4,578.		0.
Ĕ		Interest				
stra		Taxes			<del></del>	<del> </del>
Operating and Administrative		Depreciation and depletion Occupancy				<del> </del>
Adn		Travel, conferences, and meetings	17,818.	0.		17,818.
힏		Printing and publications		<del>_</del>		
<u> 5</u>		Other expenses STMT 4	22,768.	0.		22,768.
atin		Total operating and administrative				
per		expenses. Add lines 13 through 23	49,364.	6,678.		42,686.
0	25	Contributions, gifts, grants paid	300,000.			300,000.
	26	Total expenses and disbursements.				
_		Add lines 24 and 25	349,364.	<u>6,678.</u>		342,686.
	27	Subtract line 26 from line 12:		2	,	
		Excess of revenue over expenses and disbursements	-2,191.	20 504		<del> </del>
		Net investment income (if negative, enter -0-)	<del></del>	30,781.	NT / N	<del> </del>
	C	Adjusted net income (if negative, enter -0-)	, l		N/A	L

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	1,467,689
2	Enter amount from Part I, line 27a	2	-2,191
3	Other increases not included in line 2 (itemize)	3	0 .
4	Add lines 1, 2, and 3	4	1,465,498.
5	Decreases not included in line 2 (itemize) ► UNREALIZED LOSS ON INVESTMENTS	5	66,334
	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,399,164

Form **990-PF** (2018)

	2016	89,630.	953,488.		.094002
	2015	584,201.	1,323,922.		.441265
	2014	161,781.	1,290,045.		.125407
_	2013	425,315.	1,383,863.		.307339
2	Total of line 1, column (d)			2	1.077690
3	Average distribution ratio for the 5-year bas the foundation has been in existence if less	e period - divide the total on line 2 by 5.0, or by th than 5 years	e number of years	3	.215538
4	Enter the net value of noncharitable-use ass	ets for 2018 from Part X, line 5	ĺ	4	1,452,931.
5	Multiply line 4 by line 3			5	313,162.
6	Enter 1% of net investment income (1% of I	6	308.		
7	Add lines 5 and 6			7	313,470.

Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Form 990-PF (2018)

342,686.

	1990-PF (2018) MARINA ORTH FOUNDATION 27-0115 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see			age 4
_	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			1
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%		3	08.
	of Part I, line 27b			1
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).			1
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.
3	Add lines 1 and 2		3	08.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		3	08.
6	Credits/Payments:			
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 0.			į
b	Exempt foreign organizations - tax withheld at source 6b 0.			ĺ
C	Tax paid with application for extension of time to file (Form 8868)  6c  0.			1
d	Backup withholding erroneously withheld 6d 0.			_ ;
7	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2019 estimated tax			
_	rt VII-A Statements Regarding Activities	т	Van	Na
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	-	Yes	
	any political campaign?	1a		<u>X</u>
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	ĺ		i
	distributed by the foundation in connection with the activities.		-	· •
	Did the foundation file Form 1120-POL for this year?	1c		_X
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation.   \$ 0. (2) On foundation managers.  \$ 0.			•
	(1) On the foundation. $\blacktriangleright$ \$ 0. (2) On foundation managers. $\blacktriangleright$ \$ 0. Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
е	managers. > \$ 0.	-		,
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
۷	If "Yes," attach a detailed description of the activities.	-		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
٠	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			i
	By language in the governing instrument, or			i
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			<u>_</u> i_
	remain in the governing instrument?	6		<u>X</u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	_X_	
				į
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			į
	<u>DC</u>			j
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			_ ;
	of each state as required by General Instruction G? If "No," attach explanation	8b	_X_	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			الميا
	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		<u>X</u>
	For a second control of the second control o	rm <b>99</b> 0	ノーピト	(2018)

823531 12-11-18

	it VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	ł		
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► <u>WWW.FUNDAORTH.ORG</u>			
14	The books are in care of ► MAUREEN ORTH Telephone no. ► 202-36	3-5	<u>557</u>	
	Located at ► 4907 ROCKWOOD PKY NW, WASHINGTON, DC ZIP+4 ►20	016		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			$\cdot$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A_	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			1
	foreign country	l		
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):	1		;
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		i '	į
	a disqualified person?	ĺ		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			*
	(5) Transfer any income or assets to a disqualified person (or make any of either available			ì
	for the benefit or use of a disqualified person)?			1
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	j		,
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	-		- 1
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	'		
_	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b	'	
	Organizations relying on a current notice regarding disaster assistance, check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			ŧ
·	before the first day of the tax year beginning in 2018?	10		x i
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			1
_	defined in section 4942(j)(3) or 4942(j)(5)):	ł		
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2018?	1		ł
	If "Yes," list the years <b>&gt;</b> , , , , ,	[		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)  N/A	2b		- '
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
•	<b>&gt;</b>	•		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			1
-	during the year?			
h	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after	1		ž Š
Ĭ	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	1		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			,
	Form 4720, to determine if the foundation had excess business holdings in 2018.)  N/A	3b	-	٠, ١
Αs	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			<u> </u>
	had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		$\mathbf{x}^{-}$
		rm 990	)-PF	/2018)

Part VII-B   Statements Regarding Activities for Which	Form 4/20 May Be I	<b>tequirea</b> (contint	ued)				
5a During the year, did the foundation pay or incur any amount to:				Ye	s No		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	☐ Ye	s X No	İ			
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire						
any voter registration drive?			s X No	J	} }		
(3) Provide a grant to an individual for travel, study, or other similar purposes?							
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section			l.			
4945(d)(4)(A)? See instructions		X Ye	s L No	] .	1		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f						
the prevention of cruelty to children or animals?		Ye	s 🔀 No				
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i	n Regulations			فسال		
section 53.4945 or in a current notice regarding disaster assistance? See instr	ructions			5b	X		
Organizations relying on a current notice regarding disaster assistance, check	here			ŀ			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption t	from the tax because it mainta			İ			
expenditure responsibility for the grant?	E STATEMENT 7	X Ye	s No	- 1			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				ļ			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on						
a personal benefit contract?		Ye	s 🗶 No 📙				
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a j	personal benefit contract?			6b	X		
If "Yes" to 6b, file Form 8870.					1		
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Ye	s 🗶 No 📙				
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attrib	utable to the transaction?		N/A _	7b	_		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	\$1,000,000 in remuneration o			ļ	]		
excess parachute payment(s) during the year?	· <u>·</u>		s X No				
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	<i>'</i>				
1 List all officers, directors, trustees, and foundation managers and	their compensation.						
(-) Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e) E	xpense nt, other		
(a) Name and address	to position	(If not paid, enter -0-)	compensation	allov	vances		
MAUREEN ORTH	PRESIDENT	ļ	-	Į			
4907 ROCKWOOD PKY NW							
WASHINGTON, DC 20016	1.00	0.	0.		0.		
ALDEN KAMIKAWA	TREASURER						
4907 ROCKWOOD PKY NW				ļ			
WASHINGTON, DC 20016	1.00	0.	0.		0.		
MARY RAY	SECRETARY	Î j		ĺ			
4907 ROCKWOOD PKY NW	1	_	_		_		
WASHINGTON, DC 20016	1.00	0.	0.	<b></b>	<u>      0                              </u>		
·							
	_						
	<u> </u>			<u> </u>			
2 Compensation of five highest-paid employees (other than those in		enter "NONE."	(d) Contributions to	(a) E	VDODCO		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	accou	xpense nt, other		
	devoted to position		compensation	allov	vances		
NONE	_	1					
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Total number of other employees paid over \$50,000				990-P	<u>0</u>		
			Form	330-L	r (2018)		

823551 12-11-18

Form 990-PF (2018) MARINA ORTH FOUNDATION		0115624 Page 7
Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<del> </del>	
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		▶ 0
		·
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers produced to the conference of the conferen	uced, etc.	Expenses
1	<u></u>	
SEE STATEMENT 8		342,686.
2		
3		
4		
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	ines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total Add lines 1 through 3		

Form **990-PF** (2018)

F	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а		1a	1,144,351.
b		1b	1,144,351. 330,706.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,475,057.
	Reduction claimed for blockage or other factors reported on lines 1a and		
·	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,475,057.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	22,126.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,452,931.
6	Minimum investment return. Enter 5% of line 5	6	72,647.
F	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here  and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	72,647.
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018. (This does not include the tax from Part VI.)	]	
C		2c	_308.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	72,339.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	72,339.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	72,339.
F	Part XII Qualifying Distributions (see instructions)	F · · · T	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		240 606
a		1a	342,686.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	242 626
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	342,686.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	] _ ]	202
	income. Enter 1% of Part I, line 27b	5	308.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	342,378.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies fo	r the section

Form **990-PF** (2018)

#### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,				
line 7				<u>72,339.</u>
2 Undistributed income, if any, as of the end of 2018				•
a Enter amount for 2017 only			0.	<u> </u>
b Total for prior years:				•
		0.		
3 Excess distributions carryover, if any, to 2018:				į.
a From 2013 356, 796.	1			ì
<b>b</b> From 2014 98,355.				1
c From 2015 519,583.				;
d From 2016 43,153.				
e From 2017 80, 180.				
f Total of lines 3a through e	1,098,067.			
4 Qualifying distributions for 2018 from				1
Part XII, line 4: ► \$ 342,686.				
a Applied to 2017, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		- 1		
years (Election required - see instructions)		0.	·	
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				72,339.
e Remaining amount distributed out of corpus	270,347.			
5 Excess distributions carryover applied to 2018	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				!
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,368,414.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		r
e Undistributed income for 2017. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract		·		
lines 4d and 5 from line 1. This amount must			•	
be distributed in 2019				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				•
section 170(b)(1)(F) or 4942(g)(3) (Election				•
may be required - see instructions)	0.			1
8 Excess distributions carryover from 2013				,
not applied on line 5 or line 7	356,796.	. 1		
9 Excess distributions carryover to 2019.	3307.301			
Subtract lines 7 and 8 from line 6a	1,011,618.			1
10 Analysis of line 9:		<del></del>		
a Excess from 2014 98, 355.				
b Excess from 2015 519,583.				l
c Excess from 2016 43, 153.				•
d Excess from 2017 80, 180.				ţ
e Excess from 2018 270, 347.		-		
823\$81 12-11-18				Form <b>990-PF</b> (2018)

	ORTH FOUNDA		Α		15624 Page 10
Part XIV Private Operating F	<del></del>		-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo	•		▶ └	····	<del></del>
<b>b</b> Check box to indicate whether the found		ing foundation described i		4942(j)(3) or49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed	ļ	<u> </u>			
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.		/			
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying	ر ا				
under section 4942(j)(3)(B)(i)		<u> </u>			
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	<u> </u>	<u> </u>	<u> </u>	<u> </u>	
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t	he year-see inst	ructions.)			
1 Information Regarding Foundation	-				
a List any managers of the foundation wh			ributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed n	nore than \$5,000). (See	section 507(d)(2).)			
MAUREEN ORTH	<del></del>		······································	<del></del>	
b List any managers of the foundation wh			(or an equally large port	ion of the ownership of a p	artnership or
other entity) of which the foundation ha	s a 10% of greater intere	:81.			
NONE		<del></del>	. <del></del>	<del></del>	<del> </del>
2 Information Regarding Contributi					and the foundable
Check here <b>X</b> if the foundation of the foundation makes gifts, grants, etc.,					lests for funds. If
·	<del></del>				
a The name, address, and telephone num	ber or email address of t	me person to whom applic	alions should be addres	55eu.	
b The form in which applications should b	on cubmitted and inform:	ation and materials they st	ould include:		
b The form in which applications should b	e submitted and informa	ation and materials they si	iodia include.		
c Any submission deadlines:	<del></del>				
					<del></del>
d Any restrictions or limitations on award	s, such as by geographic	cal areas, charitable fields,	kinds of institutions, or	other factors:	
					5 000 DE
823601 12-11-18					Form <b>990-PF</b> (2018)

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to **Amount** status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year FUNDACION MARINA ORTH FOREIGN TO SUPPORT EDUCATIONAL CRA. 81A NO.33 AA-32 APTO 502 NON-EXEMPT PROGRAMMING FOR YOUTHS MEDELLIN COLOMBIA IN GRADES K-12. 300,000, ▶ 3a 300 000 b Approved for future payment NONE ▶ 3b Total

# Part XVI-A Analysis of Income-Producing Activities

Enter grace amounts unless atherway indigated	Unrelated b	ousiness income	Excluded b	by section 512, 513, or 514	(0)
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	Amount	Total and the contract of the
ab			<del>  -   -</del>		
	- <del>    -</del>		<del>  -   -</del>		
c			+		<del></del>
	- <del> </del>		<del> </del>		
e	- <del>                                    </del>		+ +-		
g Fees and contracts from government agencies	_		+ +-		
2 Membership dues and assessments			<del>                                     </del>		
3 Interest on savings and temporary cash			<del>                                     </del>		
investments			1 1		
4 Dividends and interest from securities			14	22,389.	·
5 Net rental income or (loss) from real estate:	,	,	+ -	22,303.	**
a Debt-financed property			+		<u> </u>
b Not debt-financed property			+ +-		
6 Net rental income or (loss) from personal			<del>                                     </del>		
property					
7 Other investment income			<del>                                     </del>		
8 Gain or (loss) from sales of assets other			<del>                                     </del>		
than inventory			18	15,070.	
9 Net income or (loss) from special events			+	13/0/01	<del>=</del>
10 Gross profit or (loss) from sales of inventory	<del>                                     </del>	<del></del>	<del>                                     </del>		· <del></del>
11 Other revenue:	<del></del>		1 .		
a			1 1		
b					
С			1 1		
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.	,	37,459.	0
13 Total. Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify calculations.	.)	·			<u> </u>
Part XVI-B Relationship of Activities	s to the Accom	plishment of E	xempt P	urposes	
Line No. Explain below how each activity for which in					nlishment of
the foundation's exempt purposes (other th			, continueto	importantly to the accom	phonnent of
		<del></del> :	<del></del>		
					<u> </u>
					·
823621 12-11-18					Form <b>990-PF</b> (2018

Rart XVII	∐ Information R Exempt Orgar		nsfers to a	nd Transactions a	ınd Relationsl	nips With Nonch	naritable	
1 Did the d	<del></del>		of the following	g with any other organizati	on described in sect	ion 501(c)	<del></del>	Yes No
				g to political organizations?		1011 30 1(0)		
	s from the reporting found	•						
(1) Cas			40.0 47.0.7.pt 0.7	guinzation on			1a(1)	x
	er assets						1a(2)	X
<b>b</b> Other tra								
(1) Sale	es of assets to a noncharita	able exempt organiza	ation				16(1)	X
(2) Pur	chases of assets from a no	oncharitable exempt	organization				1b(2)	X
(3) Ren	ital of facilities, equipment,	, or other assets					1b(3)	X
(4) Reir	mbursement arrangements	3					1b(4)	X
(5) Loa	ns or loan guarantees						1b(5)	X
(6) Per	formance of services or m	embership or fundra	using solicitatio	ns			1b(6)	X
	of facilities, equipment, m	=	· ·	· -			1c	<u> </u>
			-	dule. Column (b) should al				ets,
				ed less than fair market vali	ue in any transaction	i or sharing arrangemei	nt, show in	
(a) Line no	<ul><li>(d) the value of the goods,</li><li>(b) Amount involved</li></ul>	<del></del>		e exempt organization	(d) December			
(a) Line no	(b) Amount involved	(c) Name C	N/A	exempt organization	(u) Description	of transfers, transactions,	and snaring arr	angements
<del></del>		<del>                                     </del>	IN/A		<del> </del>			<del></del>
				<del></del>				
				<del></del>	<del>- [ </del>			
				<u> </u>				
		<u> </u>						
	<del></del>	<del></del>						
						<del></del>	<del></del>	
		<del> </del>						
		<del> </del>					<del></del> -	
2n le the fo	undation directly or indirec	ctly affiliated with or	related to one	or more tax-exempt organ	uzatione described			
	on 501(c) (other than section			of more tax exempt organ	izations described		Yes	X No
	complete the following sch		0000011 027 1					
<u></u>	(a) Name of or			(b) Type of organization		(c) Description of relati	onship	
	N/A							
					<u> </u>			
Und and				ng accompanying schedules and n taxpayer) is based on all inforr			May the IRS o	iscuss this
Sign Here		1. 1/1	1 h	Flalia	<b>L</b>		return with the shown below?	) See instr
			<u>/                                      </u>	Date	PRESII	DEN'I'	X Yes	L No
	gnature of officer or truste Print/Type preparer's n		Preparer's s		Date	Check If PT	'IN	
	Tring type proparer 3 in	amo	Treparer 3 3		oute	self- employed	•	
Paid	DOUGLAS BU	IRACK	1 1/3/1	Mens	4/20/19	, ,	200027	274
Prepare			RR, CPA	Š LLP	1 - 1/2/	Firm's EIN ► 13-	-16550	<del>5</del>
Use Only	1 0		,	- <del>-</del> -				=
-	Firm's address ► 55	1 FIFTH A	AVENUE.	SUITE 400				
		EW YORK, I			·	Phone no. 212-		
							Form <b>990</b>	)-PF (2018)

### Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Name of the organization **Employer identification number** MARINA ORTH FOUNDATION 27-0115624 Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. 🔟 For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively \$ religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Employer identification number

### MARINA ORTH FOUNDATION

27-0115624

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	MAUREEN ORTH  4907 ROCKWOOD PKY NW  WASHINGTON, DC 20016	\$ 164,631.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
2	VANGUARD CHARITABLE  P.O. BOX 55766  BOSTON, MA 02205	\$5,000.	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
3	NEW YORK, NY 10128	\$5,000.	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
4	MICHAEL & ELIZABETH GALVIN  4831 INDIAN LANE, NW  WASHINGTON, DC 20018	\$ 5,000.	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
5	JOSEPH & CAROLYN DEMARCO FOUNDATION  8014 GERMANTOWN AVENUE  PHILADELPHIA, PA 19118	\$11,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
6	BROWN BROTHERS HARRIMAN FOUNDATION C/O JEFF IDLER, ONE LOGAN SQUARE, 14TH FLOOR PHILADELPHIA, PA 19103	\$5,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions)	

Name of organization

Employer identification number

## MARINA ORTH FOUNDATION

27-0115624

<u> </u>		,		
Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
RICHARDSON FOUNDATION  245 PARK AVENUE, 41STH FLOOR  NEW YORK, NY 10167	\$6,000.	Person X Payroll		
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	 \$	Person Payroll Oncash Complete Part II for noncash contributions )		
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	\$	Person Payroll Onncash (Complete Part II for noncash contributions)		
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
,	\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
	(b) Name, address, and ZIP + 4  RICHARDSON FOUNDATION  245 PARK AVENUE, 41STH FLOOR  NEW YORK, NY 10167  (b) Name, address, and ZIP + 4   (b)			

Name of organization

Employer identification number

### MARINA ORTH FOUNDATION

27-0115624

art II Nonca	ash Property (see instructions). Use duplicate copies of F	art II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	>	<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions )	(d) Date received

Name of or	rganization	Employer identification number			
MARINA	A ORTH FOUNDATION			27-0115624	
Part III	Exclusively religious, charitable, etc., contributions from any one contributor. Complete columns (a) this completing Part III, enter the total of exclusively religious, char Use duplicate copies of Part III if additional sparents.	rough (e) and the following line er itable, etc., contributions of \$1,000 or	tny For organizations	10) that total more than \$1,000 for the yea	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) D	escription of how gift is held	
		(e) Transfer of git	t		
	Transferee's name, address, and a	ZIP + 4	Relationship of	transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held	
}	(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held	
	(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferee			transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Do	escription of how gift is held	
}	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of	transferor to transferee	

FORM 990-PF DIVIDER	NDS AND INTER	EST FROM SECUE	RITIES ST	ATEMENT 1	
SOURCE GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME		
BROWN BROTHERS HARRIMAN 34,16	57. 11,77	8. 22,389.	22,389.		
TO PART I, LINE 4 34,16	11,77	8. 22,389.	22,389.		
FORM 990-PF	ACCOUNTI	NG FEES	នា	'ATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING	4,200.	2,100.		2,100.	
TO FORM 990-PF, PG 1, LN 161	4,200.	4,200. 2,100.		2,100.	
FORM 990-PF	OTHER PROFES	SIONAL FEES	SI	ATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT MANAGEMENT FEES	4,578.	4,578.		0.	
TO FORM 990-PF, PG 1, LN 160	4,578.	4,578.		0.	
FORM 990-PF	OTHER E	OTHER EXPENSES		CATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BANK CHARGES SUPPLIES TELEPHONE EVENT EXPENSE COMPUTER EXPENSES CONSULTING FEES	179. 1,670. 584. 8,491. 151. 6,575.	0. 0.		179. 1,670. 584. 8,491. 151. 6,575.	

MARINA ORTH FOUNDATION			27-0115624	
POSTAGE PROGRAM EXPENSES MISCELLANEOUS	2,535. 2,418. 165.	0. 0. 0.	2,535. 2,418. 165.	
TO FORM 990-PF, PG 1, LN 23	22,768. 0.		22,768.	
	FOOTNOTES		STATEMENT 5	

THE FOUNDATION IS IN A 60-MONTH TERMINATION PERIOD UNDER SECTION 507(B)(1)(B). AS SUCH, THE EXCISE TAX ON INVESTMENT INCOME SHOWN ON PAGE 4 OF THE 990-PF IS NOT CURRENTLY DUE. ATTACHED TO THIS RETURN IS A COPY OF THE CONSENT TO EXTEND THE STATUTE OF LIMITATIONS FOR COLLECTING THE TAX.

FORM 990-PF (	OTHER	INVESTMENTS		STATEMENT
DESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
FIXED INCOME MUTUAL FUNDS - SEE		FMV		
ATTACHMENT A			488,222.	488,222
US EQUITIES - SEE ATTACHMENT A		FMV	428,176.	428,176
SMALL CAP EQUITY MUTUAL FUNDS -	SEE	FMV		
ATTACHMENT A			93,323.	93,323
INTERNATIONAL EQUITY MUTUAL FUNI	DS -	FMV	•	
SEE ATTACHMENT A			99,680.	99,680
EMERGING MARKETS EQUITY MUTUAL		FMV		•
FUNDS - SEE ATTACHMENT A			37,836.	37,836
TOTAL TO FORM 990-PF, PART II, I	LINE 1	13	1,147,237.	1,147,237

FORM 990-PF

EXPENDITURE RESPONSIBILITY STATEMENT PART VII-B, LINE 5C

STATEMENT

GRANTEE'S NAME

. FUNDACIO MARINA ORTH

GRANTEE'S ADDRESS

CRA. 81A NO.33 AA-32 APT 502 MEDELLIN, COLOMBIA

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

300,000. 12/31/18

300,000.

#### PURPOSE OF GRANT

TO SUPPORT EDUCATIONAL PROGRAMMING (CORE CURRICULA AND BILINGUAL EDUCATION) FOR YOUTHS IN GRADES K-12 THROUGH DIRECT SCHOOL ASSISTANCE AND PARTNERSHIPS WITH ORGANIZATIONS THAT PROVIDE SUCH SERVICES.

DATES OF REPORTS BY GRANTEE

12/31/18

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT

#### ACTIVITY ONE

THE MARINA ORTH FOUNDATION, A TAX EXEMPT 501(C)(3) NON PROFIT ORGANIZATION STRIVES TO IMPROVE THE EDUCATION OF CHILDREN AND YOUTH FROM DISADVANTAGED SOCIOECONOMIC AREAS. WORKING IN SUPPORT OF THE SUSTAINABLE DEVELOPMENT GOALS, WE SPECIALIZE IN STEM WITH A FOCUS ON TECHNOLOGY AND ROBOTICS, ENGLISH, LEADERSHIP, AND SOCIAL/EMOTIONAL SKILL BUILDING BOTH INSIDE AND OUTSIDE THE CLASSROOM. WE ALSO TRAIN TEACHERS TO BECOME MORE CREATIVE AND COMPETENT IN THESE AREAS SO THAT THEIR STUDENTS CAN EXCEL AND CONTRIBUTE TO THE DEVELOPMENT OF THEIR COUNTRY. WE PROMOTE BILINGUALISM, GENDER EQUALITY AND GIVE BOTH STUDENTS AND TEACHERS THE TOOLS TO COMPETE IN THE 21ST CENTURY.

OUR IMPACT: AFTER 13 YEARS OF WORKING IN MEDELLIN, EL CARMEN DE VIBORAL, LA CEJA AND OTHER MUNICIPALITIES OF ANTIOQUIA, COLOMBIA, AND WITH THANKS TO OUR PARTNERS, WE HAVE ACHIEVED THE FOLLOWING:

- STUDENTS BENEFITTED: 13,000 - COMPUTERS DELIVERED: 12,130

- TEACHERS IMPACTED:

- ROBOTICS CLUB MEMBERS IN 2018: 600

**EXPENSES** 

342,686.

TO FORM 990-PF, PART IX-A, LINE 1